### Form **990-EZ**

## Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2012

OMB No 1545 1150

Department of the Treasury Internal Revenue Service Sponsoning organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must fileForm 990 (see instructions). All other organizations with gross receipts less than \$200.000 and total assets less than \$500.000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Rublic

A	For t	ne 2012 calendar year, or tax year beginning , 2012, and ending					
B		If applicable C	D Employer	dentification number			
$\vdash$		schange Oliver Pennington Campaign for City	27-1909133				
H	Initial r	Council		Telephone number			
$\vdash$	Termin	alad     1111 Guinea Drive	713_9	61-1117			
$\vdash$		Houston, TX 77055					
	Applica	tion pending	F Group E Number	xemption -			
G	Acco	unting Method: X Cash Accrual Other (specify) ► H Check	► X if the	organization is <b>not</b>			
I	Webs	site: ► oliverpennington.com require	ed to attach	Schedule B (Form			
J	Tax-e	tempt status (check only one) — 501(c)(3) 501(c) ( ) ◄(insert no ) 4947(a)(1) or X 527 990, 9	90-EZ, or 9	90-PF)			
	Chec		atio <b>and</b> its o	ross receipts are			
	norm	ally <b>not</b> more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e	-postcard) r	nay be required (see			
		ictions) But if the organization chooses to file a return, be sure to file a complete return					
	asset	ines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or its (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	▶ \$	6,495.			
Pa	itt II	Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the ins	structions	for Part I)			
	г	Check if the organization used Schedule O to respond to any question in this Part I		X			
	1	Contributions, gifts, grants, and similar amounts received	1	6,495.			
	2	Program service revenue including government fees and contracts	2				
	3	Membership dues and assessments	3				
	4	Investment income	4				
		Gross amount from sale of assets other than inventory 5 a					
	b	Less, cost or other basis and sales expenses 5 b	5 7,7,1				
	J	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5 c				
ь		Gaming and fundraising events	<b>1</b> 7. ⋅ 1				
Ë		Gross income from gaming (attach Schedule G if greater than \$15,000)	- 4.				
Ě	b	Gross income from fundraising events (not including \$ of contributions	tal-1				
REVENUE		from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)					
	С	Less direct expenses from gaming and fundraising events  6 c	-7,-				
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6 d				
	7 a	Gross sales of inventory, less returns and allowances 7 a					
	b	Less cost of goods sold 7b					
	С	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) ECEIVED  Other revenue (describe in Schedule O)	7 c				
	8	Other revenue (describe in Schedule O)	8				
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<b>►</b> 9	6,495.			
	10	Grants and similar amounts paid (list in Schedule O)	10				
	11	Benefits paid to or for members	11				
EXPEZ	12	Salaries, other compensation, and employee benefits	12				
P	13	Professional fees and other payments to independent contractors UGDEIN, UI	13	5,768.			
N SC	م14	Occupancy, rent, utilities, and maintenance	14				
S	515	Printing, publications, postage, and shipping	15	195.			
~	<b>1</b> 16	Other expenses (describe in Schedule O)  See Schedule O	16	9,707.			
- 61	17	Total expenses. Add lines 10 through 16	▶ 17	15,670.			
g i	ី18 <b>រ</b>	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<u>-9,175.</u>			
N	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-	year L				
EE.		figure reported on prior year's return)	19	121,387.			
NET	20	Other changes in net assets or fund balances (explain in Schedule O)	20				
2	21	Net assets or fund balances at end of year. Combine lines 18 through 20	▶ 21	112, 212. Form <b>990-EZ</b> (2012)			
DA'	7 E 01	Panerwork Reduction Act Notice, see the senarate instructions.		E OFFO 33U-F7 (2012)			

Pai	Ealance Sheets. (see the Ins Check If the organization used Sche	itructions for Part II) edule O to respond to any qu	estion in this Part II			
			(A	) Beginning of ye		(B) End of year
22	Cash, savings, and investments			121,387	. 22	112,212.
23	Land and buildings				23	
24	Other assets (describe in Schedule O)				24	
25	Total assets			121,387	. 25	<u>112,212.</u>
26 27	Total liabilities (describe in Schedule O)  Net assets or fund balances (line 27 of c	olumn (R)must agree with hi	ne 21)	101 207		110 013
	TIII Statement of Program Service Acco	mplishments (see the instrs for	r Part III )	121,387	. 27	112,212. Expenses
	Check if the organization used Sci		question in this Part III	X		uired for section 501
	s the organization's primary exempt purpose? See				organ	) and 501(c)(4) nizations and section
mea	ribe the organization's program service a sured by expenses. In a clear and concise fited, and other relevant information for e	e manner, describe the servi each program title	ces provided, the numb	er of persons		(a)(1) trusts, optional thers)
28	Oliver Pennington was ree second term. This was th					
	· · · · · · · · · · · · · · · · · · ·	is amount includes foreign g	rants, check here		28 a	
29	See Schedule 0					
	(Grants \$ ) If th	is amount includes foreign g	rants check here		29 a	
30	(Grants V	is amount morades foreign g	rants, oncer nore		LJa	
		<b></b>			1	
		<b></b>				
		is amount includes foreign g	rants, check here		30 a	
31	Other program services (describe in Sch					
		is amount includes foreign g	rants, check here	<u> </u>	31 a	
_	Total program service expenses(add lin		<del></del>		32	
Pai	List of Officers, Directors, Check if the organization used Sci	Trustees, and Key Emp	ployees. List each one ev	en if not compensated	(see th	e instructions for Part IV
	Check if the organization used Sc		Ť	(d) Health benefi	te .	<u>L</u>
	(a) Name and Title	(b) Average hours per week devoled to position	(c) Reportable compensation (Forms W-2/1099 MISC) (If not paid, enter -0-)	contributions to emp benefit plans, and de compensation	loyee i	(e) Estimated amount of other compensation
	ver Pennington					
	ndidate	0	0.		0.	0.
_n_	no_employees	•			^	
		0	0.		0.	0.
				1	'	
				<del> </del>		
BAA		TEEA0812L	03/14/13	<del></del>		Form <b>990-EZ</b> (2012)

Form 990-EZ (2012) Oliver Pennington Campaign for City 27-1909133 Page 2

Par	<b>Cther Information</b> (Note the Schedule A and personal benefit contract statement rethe instructions for Part V) Check if the organization used Schedule O to respond to any	equirements in question in this Part V			
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,'			Yes	No
	provide a detailed description of each activity in Schedule O		33		X
34	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the a change to the organization's name. Otherwise, explain the change on Schedule 0 (see instructions)	amended documents if they reflect	-		
35 a	Did the organization have unrelated business gross income of \$1,000 or more during the year	er from husiness activities	34		X
	(such as those reported on lines 2, 6a, and 7a, among others)?	ii ii oiii busii less activities	35 a		X
b	If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an	explanation in Schedule O	35 b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to sect reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part II	ion 6033(e) notice,	<u> </u>	-	
	Did the organization undergo a liquidation, dissolution, termination, or significant	l	35 c		<u>X</u>
	disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		36		Х
	Enter amount of political expenditures, direct or indirect, as described in the instructions	37 a N/A			
	Did the organization file Form 1120-POL for this year?		37 b		X
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key any such loans made in a prior year and still outstanding at the end of the tax year covered	employe <b>cor</b> were by this return?	38 a		X
b	If 'Yes,' complete Schedule L, Part II and enter the total amount involved	38b N/A	-		. 7
39	Section 501(c)(7) organizations Enter	N/A			
	Initiation fees and capital contributions included on line 9	39 a N/A		. ]	.
b	Gross receipts, included on line 9, for public use of club facilities	39 b N/A	1. 1.		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the			: ;	.
	section 4911 ► N/A, section 4912 ► N/A; section 4955	-	1	†	.
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 49	58 excess benefit		<u></u>	
	transaction during the year or did it engage in an excess benefit transaction in a prior year the on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	nat has not been reported	40 ь		
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization		100	<u> </u>	
	managers or disqualified persons during the year under sections 4912, 4955, and 4958	▶0.		,	
d	Section $501(c)(3)$ and $501(c)(4)$ organizations Enter amount of tax on line 40c reimbursed by the organization	<b>0</b> .	. ]		1
е	All organizations At any time during the tax year, was the organization a party to a prohibite shelter transaction? If 'Yes,' complete Form 8886-T	d tax	·		
41	List the states with which a copy of this return is filed None		40 e		X
42 a	The organization's books are in care of  Sue Walden Located at  4617 Montrose, Suite 202 Houston TX	Telephone no ► 713-80 ZIP + 4 ► 77006	<u> </u>	117_	
l.				Yes	No
D	At any time during the calendar year, did the organization have an interest in or a signature financial account in a foreign country (such as a bank account, securities account, or other fi	or other authority over a nancial account)?	42 b		X
	If 'Yes,' enter the name of the foreign country.▶	,			- A
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Finan	eral Accounts		1	
С	At any time during the calendar year, did the organization maintain an office outside of the L		42 c		X
	If 'Yes,' enter the name of the foreign country ►				
<b>4</b> 3	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu oForm 1041 - Che	ck here	,	· 🗆	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year	► 43			N/A No
44 a	Did the organization maintain any donor advised funds during the year $^{\rm 9}$ If 'Yes,' Form 990 m of Form 990-EZ	ust be completed instead	44 a		X
b	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form $99$ instead of Form $990\text{-EZ}$	00 must be completed	44b		X
	Did the organization receive any payments for indoor tanning services during the year?		44 c		X
d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		44 d	· J	
45 a	Did the organization have a controlled entity of the organization within the meaning of section	n 512(b)(13)?	45 a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning	of section 512(b)(13)? If 'Yes,'			
	Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		45 b	- 1	Χ

orm <b>990-E</b>	<b>Z</b> (2012) Oliver Pennington C	ampaign for C	ity	27-190	9133 _	F	age
<b>6</b> Did th	: ne organization engage, directly or indire	otly in political comm				Yes	No
· candı	idates for public office? If 'Yes,' complete	elly, in political campa Schedule C, Part I	aign activities on benair c	or in opposition to	46	X	1
<b>int_V</b> II	Section 501(c)(3) organizations All section 501(c)(3) organization for lines 50 and 51. Check if the organization used Schedul	ons must answer o		d 52, and complete	the table	es	г
			<del></del>			Yes	No.
comp	ne organization engage in lobbying activitionete Schedule C, Part II			,	47		
	e organization a school as described in se ne organization make any transfers to an		· ·	dule E	48 49 a		<u> </u>
	es, was the related organization a section		c related organization.		49 a		
Comp emple	olete this table for the organization's five oyees) who each received more than \$10	highest compensated 0,000 of compensatio	employees (other than on from the organization	officers, directors, truste If there is none, enter '	ees and key None '		I
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099 MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimate other com		
							_
						,	_
	<del>-</del> <del></del>						
• Total	number of other employees paid over \$1	00.000			L		_
1 Comp	plete this table for the organization's five	highest compensated	independent contractors	who each received mo	ore than \$10	0,000	of
	pensation from the organization. If there is	_ <del></del>	(b) Type	of sanusa	(c) Comp	oncato	<u> </u>
	name and address of each independent contractor paid	11076 41211 \$100,000	(Б) Туре (		(c) comp	-	
		<b></b>	-				
			-				
			-				
			-				
			_				
. Takal	number of other independent contractors	a and recovered over	\$100,000				
	he organization complete Schedule A? <b>N</b> o	-		17(a)(1) nonexempt			
chari	table trusts must attach a completed Sch	edule A			► Yes	<u> </u>	_] <u>N</u>
der penalties e, correct, a	s of perjury, I declare that I have examined this return included the complete Declaration of preparer (other that office	iding accompanying schedules I) is based on all information	and statements, and to the best of of which separer has any knowl	my knowledge and belief, it is edge		_	
	VIIIII VI	nnen 8	eau	Jelly	- ZZ	3	9
ign	Signature of officer	U		Date!	/		•
ere	Oliver Pennington Type or print name and btle			<u>Camdidate</u>			
	Print/Type preparer's name	Prepares signature	McKillick,	Check X if	TIN		
aid	Barbara S. McKittrick	Barbara S. Mc	Kittrick 7/19	13 Check if if self employed I	20018737	3	
aiu		TTRICK CPA					
reparer	DANDANA D. MCKI	TIMEON CITY					

HOUSTON, TX 77055-7507

May the IRS discuss this return with the preparer shown above? See instructions

(713) 465-4827

► X Yes No

Form **990-EZ** (2012)

Phone no

#### **SCHEDULE C** (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545 0047 2012

Open to Public

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations Complete Part I A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization Employer identification number

		Pennington Cam			27-19091	
Par	t I-A	Complete if the org	ganization is exempt under section !	501(c) or is a sec	tion 527 organizati	on.
1	Provid	de a description of the	organization's direct and indirect political c	ampaign activities ir		ee Part IV
2		cal expenditures			•	\$ 15,670.
3		teer hours				
Par			rganization is exempt under section			
1	Enter	the amount of any exc	ise tax incurred by the organization under	section 4955	•	<sup>7</sup>
2	Enter	the amount of any exc	ise tax incurred by organization managers	under section 4955	<b>•</b>	\$
3	If the	organization incurred a	section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a	a correction made?				Yes No
k	If 'Ye	s,' describe in Part IV				
			rganization is exempt under section			3).
1	Enter	the amount directly ex	pended by the filing organization for sectio	n 527 exempt functi	on activities	\$
2	Enter functi	the amount of the filing on activities	g organization's funds contributed to other	organizations for se	ction 527 exempt	\$
3	Total line 1		ditures Add lines 1 and 2 Enter here and	on Form 1120 POL,	•	\$
4	Did th	ie filing organization file	Form 1120-POL for this year?			Yes No
5	organ	ization made payments	and employer identification number (EIN) of For each organization listed, enter the arons received that were promptly and direct I action committee (PAC). If additional spa	nount paid from the	filing organization's fu	inds. Also enter the
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter 0
(1)						
(2)		. <u></u>				
(3)						
(4)						
(5)						
(6)						
ВАА	For P	aperwork Reduction A	ct Notice, see the Instructions for Form 95	00 or 990-EZ.	Schedule C (F	orm 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 20	12 Olivan Bann	ington Committee	f Gita	0.5	Dav. 2
Part II-A & Complete if	the organization i	s exempt under section	on 501(c)(3) and fil	27-1909 led Form 5768 (election	Page 2
section 501	(h)).		on 001(0)(0) and m	104 1 01111 3700 (0100110	ii uiidei
A Check ► if the fill	ng organization belo	ngs to an affiliated group	(and list in Part IV ea	ch affiliated group membe	r's name,
		share of excess lobbying		5 ,	•
B Check ► ☐ If the fill	ng organization ched	ked box A and 'limited co	ntrol' provisions apply	<b>/</b> .	
(The terr		ing Expenditures ins amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	tures to influence put	olic opinion (grass roots lo	obbying).		
<b>b</b> Total lobbying expendit	tures to influence a le	egislative body (direct lobb	oying)		
c Total lobbying expendit	tures (add lines 1a ai	nd 1b)			
<b>d</b> Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add lin	es 1c and 1d)			
f Lobbying nontaxable ar both columns	mount Enter the am	ount from the following tab	ole in		
If the amount on line 1e, co	lumn (a) or (b) is	The lobbying nontaxable	amount is	7 - 1	-
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000	# ' · ·	·
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
<b>g</b> Grassroots nontaxable	amount (enter 25% o	of line 1f)			
<b>h</b> Subtract line 1g from lii	ne 1a If zero or less	, enter -0-			
Subtract line 1f from lin	ne 1c If zero or less,	enter -0-			
j If there is an amount of section 4911 tax for this	ther than zero on eiti s year <sup>?</sup>	ner line 1h or line 1i, did t	he organization file Fo	orm 4720 reporting	Yes No
(So	me organizations th	4-Year Averaging Period at made a section 501(h) o is below. See the instruct	election do not have t	to complete all of the five	
	Lobby	ring Expenditures During	4-Year Averaging Pe	rıod	
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	(e) Total
2 a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))			h		
c Total lobbying expenditures					

 Grassroots ceiling amount (150% of line 2d, column (e))
 Grassroots lobbying expenditures

**d** Grassroots nontaxable amount

Schedule **C** (Form 990 or 990 EZ) 2012

BAA

Schedule C (Form 990 or 990-EZ) 2012 Oliver Pennington Campaign for City 27-19091:

Part II-B<sub>st</sub> Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)
of the lobbying activity		No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	, —	<del> </del>   	
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?			
d Mailings to members, legislators, or the public?		_	
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?			
Total Add lines 1c through 1:		,	
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			<del>, , </del>
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912	<del></del> -	F	
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	1		<del></del>
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>	[ · · · · · · · · · · · · · · · · · · ·
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	:)(5)	, or	<u></u>
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?			3
Part IIIB Complete if the organization is exempt under section 501(c)(4), section 501(c	:)(5)	, or s	ection 501(c)
(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) Panswered 'Yes.'	art II	I-A, I	ine 3, is
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) nondeductible lobbying and political expenditures do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2 a	_
<b>b</b> Carryover from last year		2 b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
		,-,	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	cal	4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information	t II-A	(affili	ated group list),
Part I-A, Line 1 - Direct and Indirect Political Campaign Activities			
The primary purpose of the organization is the election of Oliver	<u>Per</u>	ning	ıton to
Houston City Council. In non-election years (such as 2012) the ca	a <u>mp</u> a	<u>iign</u>	
expenditures consist of maintaining the office and reaching out to	_ne	eighl	orhood
groups and organizations to discuss items of interest to the commu	ı <u>ni</u> t	<u>-</u> У	

#### **SCHEDULE 0** (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047 2012

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Öpén to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization	<del></del>
Name of the organization Oliver Pennington Campaign for City Council	Employer identification number 27–1909133
Section VII Compensation of Employees and Ind Contractors	
The campaign organization does not have any employees, and r	none of the independent
contractors were paid \$100,000.	
Form 990-EZ, Part III - Organization's Primary Exempt Purpose	
To elect Oliver Pennington to the Houston City Council and t	to communicate with the
citizens of the City Council District G concerning the candi	idate's views on
various issues affecting the city of Houston and its citizer	ns. 
Form 990-EZ, Part III, Line 29 - Statement of Program Service Accomplishme	ents
The campaign maintains a website to inform the residents of	the Councilman's
district about issues affecting the city at large and the di	istrict. Councilman
Pennington also attends numerous public meetings and worksho	ops throughout the
district to listen to residents' concerns and to respond to	their questions.

TEEA4901L 12/8/12

Schedule O - Supplemental Information Oliver Pennington Campaign for City Council		ge 2
Council	27-190	913
Form 990-EZ, Part I, Line 16 Other Expenses		
Advertising and Promotion Books campaign materials Charitable cont-Harmon Fdtn Miscellaneous Office Expenses Paypal collection fees Political donations & dues Public charitable dinners Staff meals campaign reception Travel	50 41 1,99 22 1,70 1,13 3,44	9. 0. 10. 12.
	Total $\frac{5}{9,70}$	7.

2012 .	Federal Supporting Detail		Page 1
•	Oliver Pennington Campaign for City Council		 27-1909133
Stmt. of Functional Expen	ses (990)		
Supplies Computer repair		Total	\$ 1,775. 216. 1,991.

(Rev January 2013)

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545 1709

Department of I Internal Revenu		►File	a separate appli	cation for each return.	
● If you a	re filing for an A	Automatic 3-Month Extension	n, complete only	Part and check this box	► [∑
• If you a	re filing for an A	Additional (Not Automatic) 3-	Month Extension	n, complete only Part ton page 2 of this	form)
Do not com	nplete Part II un	<i>less</i> you have already been g	ranted an autom	atic 3-month extention on a previously fi	lled Form 8868
corporation request an Associated	required to file extension of tin With Certain Pe	Form 990-1), or an additionate to file any of the forms lis	al (not automatic) ted in Part I or P nich must be sent	d a 3-month automatic extension of time ) 3-month extension of time You can eleart II with the exception of Form 8870, it to the IRS in paper format (see instruct Charities & Nonprofits	ectronically file Form 8868 to
Part I	Automatic :	3-Month Extension of Ti	me. Only subm	nit original (no copies needed).	
A corporation	on required to f	le Form 990-T and requestin	g an automatic 6	-month extension- check this box and c	omplete Part I only ► Γ
All other co income tax	orporations (incl returns	udıng 1120-C filers), partners	ships, REMICs, ai	nd trusts must use Form 7004 to reques	t an extension of time to file
				Enter filer's identi	ifying number, see instruction
	Name of exempt	organization or other filer, see instruct	ions		Employer identification number (EIN) of
Type or print	Council	ennington Campaign	-		27-1909133
File by the due date for filing your return See	1111 Gui	nd room or suite number If a P O bo nea Drive office, state, and ZIP code For a fore	Social security number (SSN)		
Enter the R	Houston,	TX 77055		parate application for each return)	01
Application Is For	1		Return Code	Application is For	Return Code
Form 990 o	r Form 990-EZ		01	Form 990-T (corporation)	07
Form 990-B	BL		02	Form 1041-A	08
Form 4720	(individual)		03	Form 4720	09
Form 990-P			04	Form 5227	10
		or 408(a) trust)	05	Form 6069	11
Form 990-T	(trust other tha	n above)	06	Form 8870	12
Telepho	one No ► <u>713</u> -		FAX No	o ► e United States, check this box	<b>▶</b> [
	for a Group Re	eturn, enter the organization'	s four digit Group	Exemption Number (GEN)	this is for the whole group,  mes and EINs of all members

If the organization does not have an office or place of business in the United States, check this box		•	
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	this is	s for the whole group, $^{ t  t}$	_
check this box ► If it is for part of the group, check this box ► and attach a list with the nan	nes ar	nd EINs of all members	3
the extension is for			
1 I request an automatic 3 month (6 months for a corporation required to file Form 990-T) extension of time			
until $8/15$ , 20 $13$ , to file the exempt organization return for the organization named above			
The extension is for the organization's return for.			
$lacktriangle$ calendar year 20 $\underline{12}$ or			
tax year beginning , 20 , and ending , 20			
2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return	al retu	urn	
Change in accounting period			
		T	
<b>3 a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3 a	\$ 0	) .
<b>b</b> If this application is for Form 990-PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3 b	\$ (	).
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3 c	\$ (	).
Caution If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-FO and Form	n 8879	79 FO for	

Caution. If you are go payment instructions